



Oklahoma State Department of Health
Creating a State of Health

Oklahoma Trauma and Emergency Systems Advisory Council

Oklahoma State Department of Health

Room 1102

1000 NE 10th St., Oklahoma City, Oklahoma

Wednesday, September 3, 2014

1:00 PM

DRAFT MINUTES

I. Call to Order by Dr. David Teague at 1:00 PM.

Roll Call by Dawn Plumb

Members Present

Greg Reid

Bob Swietek

Dr. Angela Selmon

Dr. David Teague

Eddie Sims

Dr. Michael Thomas (1:20 PM)

Members Absent

None

OSDH Staff Present

Dale Adkerson

Chris Dew

Bill Johnston

Mack McLemore

Grace Pelley

James Wilkins

Brandon Bowen

David Graham

Robert Irby

Charles McNear

Dawn Plumb

Brian Wilson

Heather Cox

Dr. Hank Hartsell

Julie Cox-Kain

Sean Oats

Felesha Scanlan

Guests Present

Cyndi Basch

Ginger Castleberry

Nathan Grigg

Lindsey Henson

Jimmy Johnson

Jennifer Manud

David Pezewskie

Dr. John Sacra

Chris Wilkens

Dr. Edwin Yeary

Michelle Beneda

Dr. James Campbell

LaWanna Halstead

David Howerton

Rodney Johnson

Cindy Moore

Sara Richard

Brad Smith

Rebecca Williamson

Vanessa Brewington

Leesa Everett

Laurel Havens

Justin Hunter

Bruce Kelley

Stacy Morton

Shawn Rogers

Stacy Smith

Steve Williamson



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II. Review and Approval of Previous Minutes: March 5 and June 4, 2014

Motion made to approve March 5 and June 4, 2014 OTERAC meeting minutes made by Eddie Sims. Motion seconded by Dr. Angela Selmon. Motion approved by unanimous roll call vote.

III. Reports

A. Emergency Systems – Brandon Bowen

Emergency Systems is fully staffed for the first time since Brandon has been with the office. Emergency Systems can now put more emphasis on systems development within all 8 Trauma Regions while still meeting statutory requirements.

The Board of Health is still accepting applications for the vacant Critical Care Nurse seat on the Council. The position is expected to be filled in January 2015.

B. Administrative

1. Trauma Systems – Brandon Bowen

Strategic planning is ongoing in all 8 Trauma Regions. Emergency Systems staff is working with the regions to address deficiencies and improve the systems of care.

2. Trauma Registry – Brandon Bowen

The Trauma Registry Hospital Portal is now communicating with OKEMIS and early data is promising. This will improve overall data collection efforts and help identify time-sensitive medical conditions where a delay in care affects patient outcome.

3. TReC Report – Dan Oller

TreC Report was presented and Dan requested input for future reports. Council asked for reports that show patients followed from injury through rehabilitation, percentage of Priority 1 and Priority 2 calls, percentages of night and weekend calls, and the number of Priority 1 patients who were over-triaged, e.g., they should be Priority 2 or less.

4. Trauma Programs – Grace Pelley

a) Trauma Fund

The Trauma Fund handout was provided, with no questions from Council members.

b) EMResource

User manual is being updated; should be available for download in a few months. Hospitals and EMS participating in federal grants are using it for compliance reporting. Working with vendor to develop Trauma-related applications



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C. RTAB (Regional Trauma Advisory Board) Reports - Chairs

1. Region 1 - Jimmy Johnson, Vice Chair

Recovery of EMS equipment left behind by ambulance services transporting patients to hospitals, particularly backboards, is an issue. Discussion by the Council produced a recommendation that the issue be handled by the Regional Planning Committees or perhaps be assigned to one of the OTERAC Working Groups

2. Region 4 - Laurel Havens

Region 4 is working to improve trauma system development and is developing parameters on time limits to get patients to Level 3 and 4 hospitals. Participation in Region Planning Committee meetings has significantly increased.

3. Region 6 - Greg Reid, Eddie Sims

A primary goal at REACT (Greg) over the next 2 years is to track average time for various ISS categories to see if improvements are being made. Greg will ask that Emergency Systems provide data that supports achievement of this goal at future RTAB meetings.

Eddie asked that Emergency Systems provide an update at next meeting on the plan to test citizens who may have been exposed to blood-borne pathogens while acting as a "Good Samaritan". Emergency Systems has met with HIV/STD group and discussed whether the Florida model is suitable for Oklahoma. A more comprehensive report will be provided at the next OTERAC meeting.

4. Region 8 - Brad Smith

Earlier in the day, Dr. Sacra chaired a meeting with RTAB chairpersons and CQI representatives from across the state. A major topic affecting all regions was delays in definitive care caused by choosing air transport based on proximity of a certain helicopter to the patient, and CQI issues with patients because of that decision.

D. Trauma System Historical Perspective Presentation - Dr. John Sacra

Copy of the PowerPoint presentation on file as Record Copy



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IV. Business

A. Work Groups

Council voted to approve work groups as listed below. Council members volunteered as shown to sit on the indicated work groups.

1. Stroke and STEMI

- Eddie Sims
- Bob Swietek

2. Medical Direction

- Dr. Angela Selmon

3. Rules

- Eddie Sims
- Greg Reid

4. RTAB Liaison

- Dr. Michael Thomas
- Eddie Sims

5. Funding and Legislation

- Dr. David Teague
- Dr. Angela Selmon

6. Rural EMS and Hospital

- Bob Sweitek
- Greg Reid

A list of volunteers for each group will be presented to the Council at the next meeting.

B. EMS Draft Rules Update

1. Rule-making process has evolved from a deadline driven process to a quality process. Rule changes must begin with a Notice of Intent to Change, a Rule Impact Statement, and a Cost/Benefit Analysis that shows the impact on businesses and communities.

Proposed EMS rule changes are now expected to be presented for approval in FY2016 instead of FY2015.

In response to a question from Mr. Sims, Brandon stated that the 150+ pages of proposed EMS rule changes are still valid and Emergency Systems is currently moving them through the new rule-making process.



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Dr. Teague asked if any operational and field issues would be negatively affected by the delay in approval of the proposed EMS rule changes. Brandon stated there would be no negative impact, since valid EMS rules are currently in place and are being enforced.

Mr. Reid stated he wished to go on record with his strong personal disappointment with the delay in approval of the proposed EMS rule changes. He cited the tremendous amount of work put in by many people in developing the proposed rule changes. He also stated that many activities/actions in the state EMS community have been delayed awaiting approval of the proposed rule changes.

Brandon assured Mr. Reid and the other Council members the time and effort spent on rule changes was not wasted – the proposed rules will be presented for approval; just later than expected.

Dr. Hank Hartsell, Deputy Commissioner for Protective Health Services, spoke on why and how the rule-making process has changed. He explained that although the process has changed, the delay is months, not years.

2. Oklahoma Emergency Response Systems Stabilization and Improvement Revolving Fund (OERSSIRF) Rule Changes – Dale Adkerson

OERSSIRF rules have not changed; instead, OSDH defined the term “matching funds” as used in the OERSSIRF application.

Mr. Reid asked if Emergency Systems had considered the impact of this new definition on potential OERSSIRF applicants, since many of them begin preparing their application/proposal well in advance of release of the annual OERSSIRF Request for Proposal (RFP).

Dale explained that preparing an OERSSIRF application/proposal before the annual RFP is released is not a best practice, because RFP requirements can change year-to-year and OSDH/Emergency Systems is not legally allowed to divulge RFP content before the RFP is officially released.

Mr. Sims recommended the work on OERSSIRF rules done by OTSIDAC (Oklahoma Trauma Systems Improvement and Development Advisory Council) Rules Working Group be continued as the first agenda item on the new OTERAC Rules Working Group.

3. Trauma Fund Rule Changes

At the June 4, 2014 OTERAC meeting, the Council approved the Trauma Fund rule changes voted on by OTSIDAC in 2011. These changes affect the stabilization/transfer and rehabilitation portions of the Trauma Fund rules. These changes are now delayed because of the changes to the rule-making process.



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The Legislature took a significant amount of money from the Trauma Fund effective July 1, 2014. In an effort to mitigate the effects of the loss and protect the fund in the future, Commissioner Cline sent a letter to all stakeholders informing them the Department is considering moving from quarterly to monthly disbursements from the Trauma Fund.

OSDH Senior Deputy Commissioner Ms. Julie Cox-Kain gave a presentation that provided insight on Commissioner Cline's letter. OSDH has determined that in the future it is in the best interests of the Trauma Fund to make monthly disbursements. Emergency Systems can readily adapt to this change—the unknown is the effect it will have on applicants for Trauma Fund monies.

Following Ms. Cox-Kain's presentation, there were extensive discussions regarding how the change to monthly distributions will affect stakeholders, particularly EMS. Brandon stated that Emergency Systems can generate a report on the subject if the Council wished to have one. The Council asked for such a report

V. Public Comment

- Shawn Rogers stated he is concerned about the focus of Emergency Systems being on Trauma and not EMS.
- Dr. Edwin Yeary expressed concern about the timing of the Trauma Fund disbursement changes and would like new funding streams identified.
- Justin Hunter requested an Education workgroup be added in the future.
- Bruce Kelley asked about the AEMT licensure level and possibly passing a portion of the EMS rules in 2015 and the bulk in 2016.
- Steve Williamson of EMSA opened with the statement "We should strive to do what is right even if it is harder than what is easy and wrong. " He stated his comments were addressed not to the Emergency Systems staff, but to the Council, the room at large, and the state EMS community. He went on to say he represents more than 1.5 million people who are in jeopardy every day because of AIDCAR and the critical care licensing fiasco in the State. He asked that when looking at ways to do things while awaiting final consideration of the proposed rules, everyone should look at things that endanger lives.
- Rodney Johnson expressed concern about the OERSSIRF grant process and the delay with the rules changes.

VI. Next Meeting Date:

1:00 PM, Wednesday, November 5, 2014, Metro Technology Center, Springlake Campus, Business Conference Room I

VII. Adjournment at 3:04 PM